

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	First Named Inventor	KING
	COMPLETE IF KNOWN	
	Application Number	Unknown
	Filing Date	Herewith
	Group Art Unit	Unknown
	Examiner Name	Unknown

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PACKAGE FOR CONTROLLING DIETARY
CALORIC INTAKE

the specification of which

☒ is attached hereto
OR ☐ was filed on _____ as United States Application Number _____
or PCT International Application Number _____
and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56.

I hereby claim foreign priority benefits under 35 U.S.C. §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (mm/dd/yyyy)	Priority Not Claimed	Certified Copy Attached YES NO	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I hereby claim the benefit under 35 U.S.C. §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (mm/dd/yyyy)

I hereby claim the benefit under 35 U.S.C. §120 of any United States application(s), or 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

<i>U.S. Parent Application or PCT Parent Number</i>	<i>Parent Filing Date (MM/DD/YYYY)</i>	<i>Parent Patent Number (if applicable)</i>

As a named inventor, I hereby appoint Anthony H. Handal, Registration No. 26,275, and all other registered practitioners listed under Customer No.:



00545

PATENT TRADEMARK OFFICE

as my attorneys or agents to prosecute this application, and to transact all business in the Patent and Trademark Office connected therewith. Address all telephone calls to Anthony H. Handal at (203) 838-8589.



00545

PATENT TRADEMARK OFFICE

Address all correspondence to: Customer No.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Names (at least one name in full plus other names or initials)			Family Name or Surname		
Theresa Ann			KING		
Inventor's Signature:	<i>Theresa A. King</i>			Date:	10-15-2003
Residence City	Atlanta	State	GA	Country	US
Post Office Address:	1352 Middelsex Avenue				
City	Atlanta	State	GA	Zip	30306
				Country	US

☐ Additional inventors are being named on the separate sheet attached hereto.